

Unclaimed Money Fund Original Owner Claim Form

Mail to: Tarrant County Auditor's Office
Unclaimed Property
100 E. Weatherford St. Room 506
Fort Worth, TX 76196-0103

ATTACH THE FOLLOWING INFORMATION

- (A) Proof of your social security number (Copy of your Social Security card or W2 form).
- (B) Copy of your Driver's License or any official form used for identification.
- (C) List of all addresses used that may be associated with property being claimed, including P.O. boxes.

Failure to provide your **IDENTIFICATION, SIGNATURE OR COMPLETION OF THIS CLAIM FORM**, will result in our returning it to you. You must be 18 or older to claim property. Social Security Number is **NOT** required, but may help in identifying you as a property owner.

CLAIMANT INFORMATION (please print)

Name: _____
(Last) (First) (MI)

Co-Owner _____
(Last) (First) (MI)

Address _____ (_____) _____
Day Time Phone, including Area Code

City _____ State _____ Zip _____

OWNER PROPERTY INFORMATION A separate Claim Form is required for each claim.

Property ID: _____
Owner Name: _____
Year Reported _____
Description: _____
Claim Amount: _____

Please Note: State law limits the fees charged by all outside search firms or private investigators who assist you in locating unclaimed property to no more than 10% of the amount of the claim.

The named claimant hereby certifies that this claim for property presumed abandoned is valid and just, that all statements herein are true and correct, and that upon payment of this claim said claimant will indemnify and hold harmless Tarrant County and its officers and employees from any damages, claims or losses of any kind resulting from the payment of the above described property to Claimant.

CLAIMANT'S SIGNATURE _____ DATE _____

CO-OWNER'S SIGNATURE _____ DATE _____

If you have any questions regarding Unclaimed Property, you may call (817) 884-1205.
Our Fax number is (817) 884-1104.

Under Ch. 559, Government Code, you are entitled to review, request and correct information we have on file for you, with limited exceptions in accordance with Ch. 552, Government Code. To request information for review or to request error correction, contact us at the address or phone number listed on this form.